

10 of 2

CLAIMS ONLY							Application Number 1010110043		Filing Date			
							Applicant(s)					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/						51		/			
2		/					52		/			
3		/					53		/			
4		/					54		/			
5		/					55		/			
6		/					56		/			
7		/					57		/			
8		/					58		/			
9		/					59	/	/			
10		/					60		/			
11		/					61		/			
12		/					62		/			
13		/					63	/				
14	/	/					64		/			
15	/	/					65		/			
16	/	/					66		/			
17	/	/					67		/			
18	/	/					68		/			
19	/	/					69	/				
20	/	/					70		/			
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47		/					97	/				
48		/					98		/			
49		/					99		/			
50		/					100		/			
Total Indep	6						Total Indep	6				
Total Depend	37						Total Depend	44				
Total Claims	43						Total Claims	50				

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	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep						
Total Depend						
Total Claims						